

APPENDIX H

SAMPLE CHECKLIST FOR DEPLOYMENT FOR COMBAT HEALTH SUPPORT OPERATIONS

H-1. General

a. This appendix provides a sample checklist that can be used in the event of mobilization or deployment. It is not to be considered all-inclusive as there may be specific procedures or requirements that are unique to the command assigned and to the operation.

b. Additional checklists for CSS operations in general are contained in FM 63-6.

H-2. Sample Predeployment Checklist

a. Unit Operations.

- Are appropriate doctrinal and training literature products and procedures available?
- Is the OPLAN current and available? (Are there any contingency plans or mass casualty plans developed or required?)
- Are the commander's guidance, intent, and concept of the operation clearly established and available?
- Has a medical threat update been requested and received?
- Has the CHS planner been involved early in the planning process?
- Are maps, overlays, aerial reconnaissance photographs, or other similar documentation of the AO available?
- Has the CHS C2 structure been identified?
- Have individual unit/command responsibilities been delineated?
- Have the responsibilities been clearly stated for both supporting and supported units?
- Have all preparation for oversea movement (POM)/preparation of replacements for oversea movement (POR) requirements been accomplished?
- Have all OPSEC measures been taken?
- Have language-qualified personnel been identified?
- Are passports required? (If so, how long is required to obtain them?)
- For domestic support operations—
 - Has proper authority been received for the tasking?
 - Have the responsibilities of the DOD component, other federal agencies, state and local governmental agencies, relief organizations, and others been clearly delineated?
 - Have funding sources been identified for reimbursement?
 - Have eligibility for care issues been addressed and a clearly stated policy established?
 - Has coordination for administrative/logistics support been accomplished?

- ___ For humanitarian assistance and disaster relief operations—
 - ___ Has clear legal authority been granted for participation?
 - ___ Has coordination with the country team and other appropriate services/agencies been accomplished?
 - ___ Have funding sources been identified?

b. *Training.*

- ___ Has initial or refresher training been accomplished in the following areas?
 - ___ Preventive medicine concerns in the AO, to include—
 - ___ Field sanitation and personal hygiene.
 - ___ Prevalence of endemic and epidemic diseases.
 - ___ Poisonous plants, wild animals, and reptiles.
 - ___ Climate and associated environmental concerns.
 - ___ Pest management.
 - ___ Personal protective measures (insect repellent, bed netting, sunscreen).
 - ___ Stress control measures.
 - ___ Operations, signal, and communications security.
 - ___ Military occupational specialty refresher training.
 - ___ Common soldier tasks refresher training.
 - ___ Mass casualty situations.
 - ___ First-aid refresher training for nonmedical personnel.
 - ___ Instruction on litter handling and litter bearer duties for nonmedical personnel.
- ___ Have personnel been oriented to new AO and mission, to include—
 - ___ Mission update.
 - ___ Update on OPLANs, operation orders (OPORDs), or fragmentary orders (FRAGOs).
 - ___ Emergency warning signals.
 - ___ Threat update.
 - ___ Force protection measures.
 - ___ Terrorism awareness and antiterrorism measures.
 - ___ Rules of engagement.
 - ___ Uniform requirements and issue of specific equipment or clothing for the mission (such as extreme cold weather operations).
 - ___ Local customs and mores.
 - ___ Religious beliefs of the population (in many cases, there may be more than one and they may be at odds with each other).
 - ___ Status of Forces agreements.
 - ___ Local laws.
 - ___ Personnel restrictions, curfews, and pass procedures.
 - ___ Applicable international laws, agreements, or conventions.
 - ___ Applicable US laws, codes, and regulatory guidance.
 - ___ Languages (there may be more than one predominate language or dialect within the language).
 - ___ Political considerations and dynamics in the region.

- Location and hours of operation of support facilities, if available.
- Climate and terrain and their potential impact on mission accomplishment.
- Status of HN support available.

c. *Concept of Combat Health Support.*

- Has mission assessment been completed?
- Has support been tailored to the specific mission?
- Are personnel or equipment augmentation or reinforcement required to accomplish mission?
- Have the MESs been inspected for dated and/or missing items?
- Are there any special equipment (pitons, piton hammers, ropes, and such) requirements?
- Are there any specialized clothing requirements (cold weather gear, jungle fatigues)?
- Are there requirements for chemoprophylaxis while in the AO? (If so, are appropriate medications available or requisitioned?)
- Will the unit participate in an operation consisting of traditional force structure (medical platoon, FSMC, MSMC, corps medical units)? If not—
 - Is there a requirement to coordinate directly with the USAF for aeromedical evacuation support? (If so, are the appropriate DD forms on hand? Has a liaison been appointed?) (Refer to FM 8-10-6.)
 - Is there a requirement to coordinate directly with the USN for hospital ship support? If so—
 - Are medical evacuation pilots deck-landing qualified?
 - Is communications equipment interoperable?
 - How will CHL (to include blood) be obtained?
- Are there any special storage requirements?
- Will automated reporting systems be used (Theater Army Medical Management Information System [TAMMIS])? If so—
 - Are equipment and software on hand?
 - Are there any special coordination requirements to support the equipment?
- Does this mission involve a multinational force? If so—
 - What are the endemic diseases of each participating country?
 - Is the US responsible for CHS for the other nations' forces?
- What is the composition of the population to be supported?
 - Healthy soldiers in a combat-related role or a cross-section of the civilian community from infants to geriatrics?
 - If infant and geriatric patients are anticipated, are MESs augmented with appropriate medications and equipment to treat these patients?
- What support can the HN provide? Are contracting personnel available to negotiate support requirements?
- Are veterinary personnel available for the inspection of locally procured foodstuffs?
- Are PVNTMED personnel available to inspect water and ice sources for potability?

- _____ Is there a possibility that PVNTMED support will be required for temporary camps established for displaced persons or refugees? If so—
 - _____ What effect will it have on the provision of PMM to supported troops?
 - _____ What is the status of PVNTMED supplies to support the additional mission?
- _____ Will PVNTMED assets require augmentation?
 - _____ Is support to refugees anticipated?
 - _____ Is support to EPW and/or detainees anticipated?